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## FACSIMILE COVER SHEET

MAR 21 2005

DATE: **March 21, 2005**  
 TO: **Examiner  
CHAI, Longbit  
USPTO GAU 2131**  
 FROM: **Jeffrey G. Toler** *[Signature]*  
**Reg. No. 38,342**

**RE: RESPONSE TO NON-FINAL OFFICE ACTION**

**U.S. APP NO.:** **10/623,274**

**FILING DATE.:** **07/18/2003**

**APPLICANT(S):** **Brian Gonsalves et al.**

**ATTY DKT NO.:** **1033-SS00378**

**TITLE:** **SYSTEM AND METHOD FOR DETECTING  
COMPUTER PORT INACTIVITY**

**NO. OF PAGES (INCL. COVER SHEET):** **12**

### MESSAGE:

Attached please find:

- PTO/SB/21 Transmittal Form (1 pg.)
- PTO/SB/17 Fee Transmittal Form (1 pg.)
- Response to Non-Final Office Action (9 pgs.)

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

|  |                 |
|--|-----------------|
| Application Number                       | 10/623,274      |
| Filing Date                              | 07/18/2003      |
| First Named Inventor                     | Brian Gonsalves |
| Art Unit                                 | 2131            |
| Examiner Name                            | Chai, Longbit   |
| Total Number of Pages in This Submission | 11              |
| Attorney Docket Number                   | 1033-SS00378    |

## ENCLOSURES (Check all that apply)

|   |   |  |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> After Allowance Communication to TC   |
| <input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                            |
| <input type="checkbox"/> Extension of Time Request  | <input type="checkbox"/> Terminal Disclaimer  | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)                        |
| <input type="checkbox"/> Express Abandonment Request  | <input type="checkbox"/> Request for Refund   | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Information Disclosure Statement   | <input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD  | <input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks   |   |  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |   |          |        |
|--------------|---|----------|--------|
| Firm Name    | TOLER, LARSON & ABEL, LLP   |          |        |
| Signature    |  |          |        |
| Printed name | Jeffrey G. Toler  |          |        |
| Date         | 3-31-2005   | Reg. No. | 38,342 |

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

|                       |   |      |          |
|-----------------------|---|------|----------|
| Signature             | Laura H. Andre  |      |          |
| Typed or printed name |  | Date | 03/21/05 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|   |      |   |  |
|---|------|---|--|
| <b>Effective on 12/08/2004.</b><br><i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i> |      | <b>Complete If Known</b>  |  |
| <b>FEES TRANSMITTAL</b><br><b>For FY 2005</b>   |      | <b>Application Number</b> 10/623,274<br><b>Filing Date</b> 07/18/2003<br><b>First Named Inventor</b> Brian Goncalves<br><b>Examiner Name</b> Chai, Longbit<br><b>Art Unit</b> 2131<br><b>Attorney Docket No.</b> 1033-SS00378 |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27                                    |      |   |  |
| <b>TOTAL AMOUNT OF PAYMENT</b>  | (\$) | 300.00  |  |

**METHOD OF PAYMENT** (check all that apply)

|  |                                      |                                      |                               |   |
|--|--------------------------------------|--------------------------------------|-------------------------------|---|
| <input type="checkbox"/> Check   | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>50-2469</u> Deposit Account Name: <u>TOLER, LARSON &amp; ABEL, LLP</u><br>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |                                      |                                      |                               |   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) <input checked="" type="checkbox"/> Credit any overpayments |                                      |                                      |                               |   |

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   | _____          |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    | _____          |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    | _____          |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   | _____          |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     | _____          |

**2. EXCESS CLAIM FEES**

|                        |                              |                 |
|------------------------|------------------------------|-----------------|
| <u>Fee Description</u> | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> |
|------------------------|------------------------------|-----------------|

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

|                     |                     |                 |                      |                                  |                 |                      |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|-----------------|----------------------|
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|-----------------|----------------------|

5 - 20 or HP = 5 x 50 = 250.00

HP = highest number of total claims paid for, if greater than 20

|                      |                     |                 |                      |
|----------------------|---------------------|-----------------|----------------------|
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------|---------------------|-----------------|----------------------|

5 - 3 or HP = 2 x 50 = 50.00

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

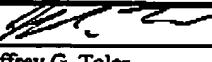
|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|

- 100 = 100 / 50 = 1 (round up to a whole number) x 250.00 = 250.00**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: \_\_\_\_\_

**SUBMITTED BY**

|                          |   |  |                               |
|--------------------------|---|--|-------------------------------|
| <b>Signature</b>         |  | <b>Registration No.</b> 38,342<br>(Attorney/Agent) | <b>Telephone</b> 512-327-5515 |
| <b>Name (Print/Type)</b> | Jeffrey G. Toler  |  |                               |

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PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Brian Gonsalves et al.

RECEIVED  
CENTRAL FAX CENTER

Title: SYSTEM AND METHOD FOR DETECTING COMPUTER PORT INACTIVITY

MAR 21 2005

App. No.: 10/623,274

Filed: 07/18/2003

Examiner: Chai, Longbit

Group Art Unit: 2131

Customer No.: 34456

Confirmation No.: 2414

Atty. Dkt No.: 1033-SS00378

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Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

## RESPONSE TO OFFICE ACTION

Dear Sir:

In response to the Office Action mailed December 21, 2004, please amend the above-identified application as follows:

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Laura H. Andre

Typed or Printed Name

Signature